

Name of Person Filing **Herald Grandstaff** File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name Unknown</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
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<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>11.a. Nature of such dealing.</p> <p>Unknown</p> <p>11.b. Approximate dollar value of such dealing. Unknown</p> <p>12.a. Nature of interest held or income received.</p> <p><i>During the course of 2004, I had a meal with a vendor to the GCIM. I cannot recall who paid for the meal or the cost of my share of the meal, if paid for by the vendor.</i></p> <p>12.b. Amount. Unknown</p>
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C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>14.a. Nature of payment.</p>
<p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment.</p>

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8. Name and address of Business (including trade name, if any).
 Name **O'Donnell, Schwartz & Anderson**
 Trade Name, if any:
 P.O. Box, Bldg., Room No., if any
 Street **1900 L St., N.W.**
 City **Washington,**
 State **D.C.** ZIP Code + 4 **20036-5080**

9. Business deals with:
 a. Labor Organization
 b. Trust
 c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.
 Name
 Trade Name, if any:
 P.O. Box, Bldg., Room No., if any
 Street
 City
 State ZIP Code + 4

11.a. Nature of such dealing.
Attorney

11.b. Approximate dollar value of such dealing. **X \$411,244.00**

12.a. Nature of interest held or income received.
12.16.04 lunch

12.b. Amount. **\$55**

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).
 Name
 Trade Name, if any:
 P.O. Box, Bldg., Room No., if any
 Street
 City
 State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer or Consultant ?

14.b. Amount of payment.